

ISSUE SLIP STAPLE AREA (for additional cross references)

2/10/11  
2/10/11

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	mg		7/1/0
O.I.P.E. CLASSIFIER			10/7-12-00
FORMALITY REVIEW	HA	858	08-18-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	4 02 9 12
1	28 04 06
2	02 02 06
3	N N N
4	N N N
5	N N N
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9	N N N
10	N N N
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47	N N N
48	N N N
49	N N N
50	N N N

Claim	Date
Final	
Original	9 02 9 12
1	28 04 06
2	02 02 06
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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